

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Mr</i>	<i>2014</i>	<i>2/24/00</i>
O.I.P.E. CLASSIFIER		<i>2</i>	<i>3/3/00</i>
FORMALITY REVIEW		<i>104477</i>	<i>4-5-00</i>
RESPONSE FORMALITY REVIEW		<i>104477</i>	<i>6-15-00</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
÷ Restricted O Objected

Claim	Date
Final	
Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
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48	✓
49	✓
50	✓

Claim	Date
Final	
Original	
51	✓
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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